

20 13

FIRST/SECOND CLASS LIQUOR LICENSE AND TOBACCO APPLICATION

LICENSE YEAR IS MAY 1ST THROUGH APRIL 30TH OF THE FOLLOWING YEAR

Chris Russo

Print Full Name of Person, Partnership, Corporation, Club or LLC

Doing Business As - Trade Name

131 Main St.

Street and street number of premises covered by this application

Burlington, VT 05401

Town or City & Zip Code

N.A.

Telephone Number

Mailing Address (if different from above)

Email address chrisrusso77@yahoo.com

Please circle appropriate categories

FIRST CLASS

SECOND CLASS

TOBACCO

Restaurant

Hotel

Cabaret

Club

Commercial Kitchen (a Liquor Control Commercial Caterer's License is needed with this license)

* recommended for approval
@ 6/10/13 LC mtg
all standard conditions
contingent upon Fire Marshal approval

FEES:

FIRST CLASS LICENSE - \$100.00 to DLC and \$100.00 to Town/City

SECOND CLASS LICENSE - \$50.00 to DLC and \$50.00 to Town/City

TOBACCO ONLY LICENSE - \$10.00 to Town/City only
(there is no fee for tobacco if applying for second class)

TO THE CONTROL COMMISSIONERS OF THE TOWN/CITY OF Burlington, VERMONT
Application is hereby made for a license to sell malt and vinous beverages under and in accordance with Title 7, Vermont Statutes Annotated, as amended, and certify that all statements, information and answers to questions herein contained are true; and in consideration of such license being granted do promise and agree to comply with all local and state laws; and to comply with all regulations made and promulgated by the Liquor Control Board. Upon hearing, the Liquor Control Board may, in its discretion, suspend or revoke such license whenever it may determine that the law or any regulations of the Liquor Control Board have been violated, or that any statement, information or answers herein contained are false.

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS FOR SUSPENSION OR REVOCATION OF THE LICENSE, AFTER NOTICE AND HEARING.

If this premise was previously licensed, please indicate name Esperanto *

I/we are applying as: (please circle one) Pending

INDIVIDUAL
PARTNERSHIP

LIMITED LIABILITY COMPANY
CORPORATION

Please fill in name and address of individual, partners, directors or members.
LEGAL NAME STREET/CITY/STATE

* Christopher J. Russo 37 Decatur St #4
Burlington, VT 05401

* Are all of the above citizens of the UNITED STATES? ☒ Yes ☐ No
(Note: Resident Alien is not considered a U.S. Citizen)

If naturalized citizen, please complete the following:

Christopher J. Russo

Name

Court where naturalized (City/State/Zip)

Date

pd chk # 1417 lo
\$100.00 5/16/13

CORPORATE INFORMATION:

If you have checked the box marked CORPORATION, please fill out this information for stockholders (attach sheet if necessary).

LEGAL NAME

STREET/CITY/STATE

Pending

Date of incorporation _____ Is corporate charter now valid? _____

Corporate Federal Identification Number _____

Have you registered your corporation and/or trade name with the Town/City Clerk? _____ and/or Secretary of State? _____ (as required by VSA Title 11 § 1621, 1623 & 1625).

ALL APPLICANTS

HAVE ANY OF THE APPLICANTS EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIMINAL OR MOTOR VEHICLE OFFENSE IN ANY COURT OF LAW (INCLUDING TRAFFIC TICKET(S)) AT ANY TIME?

☐ YES

☒ NO

If yes, please complete the following information: (attached sheet if necessary)

Name

Court/Traffic Bureau

Offense

Date

Do any of the applicants hold any elective or appointive state, county, city, village/town office in Vermont? (See VSA, T.7, Ch 9, §223) complete the following information:

YES ☒ NO ☐ If yes, please

Name

Office

Jurisdiction

Please give name, title and date attended of manager, director, partner or individual who has attended a Liquor Control Licensee Education Seminar, as required by Education Regulation No. 3:

NAME

TITLE

DATE

Chris Russo

12/12

(If you have not attended an Education Seminar prior to making application, please visit www.liquorcontrol.vermont.gov and click on Seminar Schedule for a list of Seminars in your area)

FOR ALL APPLICANTS: DESCRIPTION /LOCATION OF PREMISES (Section 4)

Description of the premises to be licensed Corner of St. Paul + main st.

Does applicant own the premises described? YES If not owned, does applicant lease the premises? _____

If leased, name and address of lessor who holds title to property: _____

Are you making this application for the benefit of any other party? NO

FIRST CLASS APPLICANTS ONLY: No first class license may be issued without the following information.

HEALTH LICENSE #: Food pending Lodging _____ (if licensed as a Hotel)

VERMONT TAX DEPARTMENT: Meals & Rooms Certificate/Business Account # pending

Business is devoted primarily to: (Circle one)

☒ FOOD (restaurant) ☐ ENTERTAINMENT (cabaret) ☐ HOTEL ☐ CLUB ☐ COMMERCIAL CATERING

If you are considering Outside Consumption service on decks, porches, cabanas, etc. you must complete an Outside Consumption Permit. This form can be found on our website at www.liquorcontrol.vermont.gov and then click on licensing and then applications.

CABARET APPLICANTS ONLY:

Applicant hereby certifies that the sale of food shall be less in amount or volume than the sales of alcoholic beverages and the receipts from entertainment and dancing; if at any time this should not be the case, the applicant/licensee shall immediately notify the Department of Liquor Control of this fact.

Signature of Individual, Partner, authorized agent of Corporation or LLC member

ALL APPLICANTS MUST COMPLETE AND SIGN BELOW

The applicant(s) understands and agrees that the Liquor Control Board may obtain criminal history record information from State and Federal repositories prior to acting on this application.

I/We hereby certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application (VSA, Title 32, §3113).

In accordance with 21 VSA, §1378 (b) I/We certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

If applicant is applying as an individual: I hereby certify that I/We are not under an obligation to pay child support or that I/We are in good standing with respect to child support or am in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, §795).

Dated at 5/16/13 City Hall in the County of Chittenden and State of Vermont
this 5th day of May, 2013

Corporations/Clubs: Signature of Authorized Agent Individuals/Partners (All partners must sign)

(Title)

NOTICE: After local action, all new applications are investigated by the Enforcement and Licensing Division prior to approval/disapproval of the license by the Liquor Control Board. This process can take anywhere from two weeks to six weeks to complete once the application has reached Liquor Control.

TOWN/CITY APPROVAL/DISAPPROVAL

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the commissioners will endorse their recommendation on the back of the applications and transmit both copies to the Liquor Control Board for suitable action thereon, before any license may be granted. For the information of the Liquor Control Board, all applications shall carry the signature of each individual commissioner registering either approval or disapproval. Lease or title must be recorded in town or city before issuance of license.

_____, Vermont, _____
Town/City Date

APPROVED

DISAPPROVED

Approved/Disapproved by Board of Control Commissioners of the City or Town (circle one) of _____

Total Membership _____ members present

Attest, _____
City or Town Clerk

TOWN OR CITY CLERK SHALL MAIL ONE APPLICATION DIRECTLY TO THE DEPARTMENT OF LIQUOR CONTROL, 13 Green Mountain Drive, Montpelier, VT 05602. If application is disapproved, local control commissioners shall notify the applicant by letter.

No formal action taken by any agency or authority of any town board of selectmen or city board of aldermen on a first or second class application shall be considered binding except as taken or made at an open public meeting. VSA Title 1 §312.

SECTION 5111 AND 5121 OF THE INTERNAL REVENUE CODE OF 1954 REQUIRE EVERY RETAIL DEALER IN ALCOHOLIC BEVERAGES TO FILE A FORM ANNUALLY AND PAY A SPECIAL TAX IN CONNECTION WITH SUCH SALES ACTIVITY. FOR FURTHER INFORMATION, CONTACT:

THE BUREAU OF ALCOHOL, TOBACCO & FIREARMS (TTB)
DEPARTMENT OF THE TREASURY
550 MAIN STREET, CINCINNATI, OH 45202

(513) 684-2979



LIQUOR LICENSE

NEW APPLICANT QUESTIONNAIRE

D/B/A (Business Name) Reimen

Contact person Chris Russo Contact Phone 802-238-1754

1. Have you ever had a liquor license before? If yes, please explain.

Yes I have a 1st + 3rd class
at San Sai restaurant

2. Please describe your experience serving or selling alcohol?

I have been serving alcohol
since the mid 90's

3. Are you familiar with the laws relating to the sale of alcohol in Vermont? Have you completed the training required by DLC? Have your employees? If not, what is your plan for training?

Yes

4. Have you had an opportunity to meet with an inspector from the Department of Liquor Control?

yes

5. How many employees will you have?

N.A. Est. 8-10

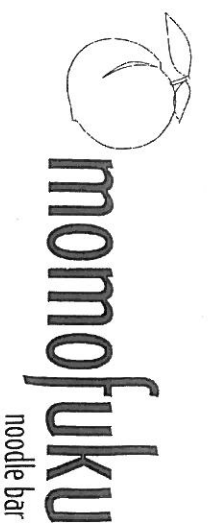
6. What is/will the square footage of the public space and what is/will be your occupancy load??

1750 s.f.

7. What kind of precautions will you take to prevent underage sales?

educating staff. and making
sure to I.D. and not
overserve

Please note that your application will not go before the License Subcommittee until this application has been satisfactorily completed and returned to the Clerk's Office



Dinner Menu – November 24, 2012

daily

- Pig Tails – pickled Asian pear, chili, scallion 14
- Littleneck Clams – fermented black bean, yuzu, Korean finger chili 14
- Duck Sausage Rice Cakes – kohlrabi, mint, cabbage 14

buns

- Pork / Shiitake – hoisin, scallion, cucumber 10/5
- Shrimp – spicy mayo, pickled shallot, iceberg 12
- Oyster – horseradish mayo, pickled red onion, cucumber 12

bowls

- Momofuku Ramen – pork belly, pork shoulder, poached egg 16
- Spicy Miso Ramen – smoked chicken, scallion, sesame 15
- Ginger Scallion Noodles – pickled shiitake, cucumber, cabbage 12
- Chilled Spicy Noodles – Sichuan sausage, spinach, cashews 14

sides

- Brussels Sprouts – Benton's bacon, kimchi, Thai basil 10
- Nugget Potatoes – yonito, poached egg, chili 10
- Cauliflower – harissa, freekeh, mint 10

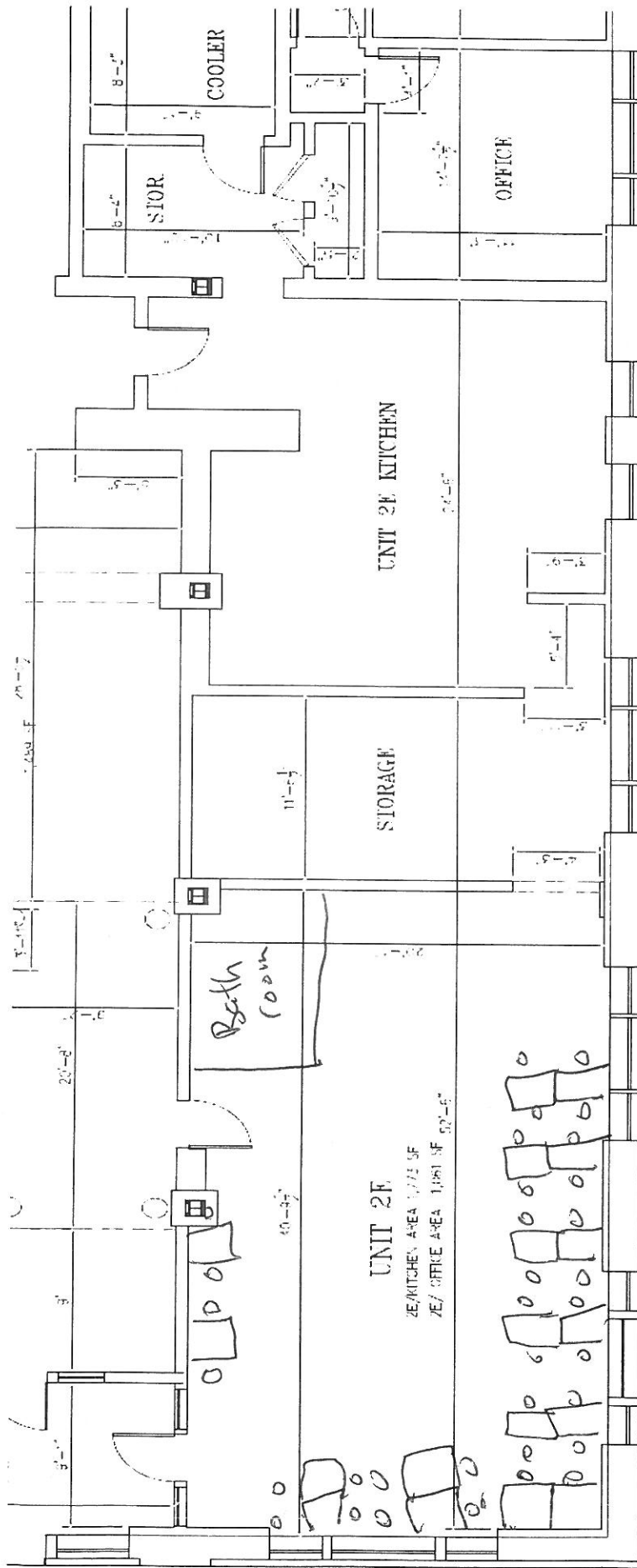
milk bar

- Soft Serve – Peanut Butter / Ritz Cracker / Twist 5
- Mint Chocolate Cake Truffles 4

Handwritten signature: D. F. H.

Handwritten notes:
 25
 100
 360
 12
 Side

* Momofuku/Milk cookbooks and Lucky Peach Issue 5 sold here.
 ** Please let us know if you have any food allergies. Thank you.



LC - item 10
Ramen

25 tables

50 Seats